

**CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF WORKFORCE PLANNING
QUALIFICATIONS ASSESSMENT FOR
ASSOCIATE BUDGET ANALYST**

This examination will provide you with an opportunity to demonstrate significant aspects of your qualifications for Associate Budget Analyst, with the California Department of Corrections and Rehabilitation (CDCR). The information you provide will be rated based on objective criteria created by Subject Matter Experts. The rating will be used to determine your final score in this examination. If successful, your name will be placed onto a separate eligible list for each classification listed above. The list will be used by CDCR locations/facilities statewide to fill existing vacancies. A "Conditions of Employment" form is included in this examination which will allow you to select the location and time bases you are interested in working. It is **required** that you **personally complete** this examination accurately and without assistance.

Testing Period Information: Candidates may test for this classification **once** in a 12 month period.

You will be evaluated based on your ability to follow directions and read, interpret, and respond appropriately to the questions in this Qualifications Assessment. Candidates who fail to follow the instructions will be eliminated from this examination(s).

THIS AFFIRMATION MUST BE COMPLETED

Government Code Section 18935:

"The board may refuse to examine or, after examination, may refuse to declare as an eligible or may withhold or withdraw from certification, prior to appointment, anyone who comes under any of the following categories:

- j. Has intentionally attempted to practice any deception or fraud in his or her application, in his or her examination, or in securing his or her eligibility."

I hereby certify and understand that the information provided by me on this questionnaire is true and complete to the best of my knowledge and contains no willful misrepresentation or falsifications. I also understand that if it is discovered that I have made any false representations, I will be removed from the list resulting from this examination and may not be allowed to compete in future examinations for State employment. If already hired from the result of this examination, I may have adverse action taken against me, which could result in dismissal.

SIGNATURE: _____

DATE: _____

NAME (PRINTED): _____

SOCIAL SECURITY NUMBER: _____

HOME PHONE NUMBER: _____

WORK PHONE NUMBER: _____

YOUR COMPLETED QUALIFICATIONS ASSESSMENT MUST INCLUDE YOUR ORIGINAL SIGNATURE.
COMPLETED QUALIFICATIONS ASSESSMENTS MUST BE MAILED OR DELIVERED TO THE FOLLOWING
LOCATION:

Mail to:

Department of Corrections and Rehabilitation
Office of Workforce Planning
P.O. Box 942883
Sacramento, CA 94283-0001

or Deliver in Person to:

Department of Corrections and Rehabilitation
Office of Workforce Planning
1515 "S" Street, Room 101N
Sacramento, CA 95811

NOTE:

- Candidates whose Qualifications Assessment is postmarked, personally delivered or received via interoffice mail after the due date will be eliminated from the examination.
- Be sure your envelope has **adequate postage** if submitting via mail.
- Facsimiles (FAX) will **NOT** be accepted under any circumstances.
- Make and keep a photocopy of the completed Qualifications Assessment for your records.

GENERAL INSTRUCTIONS

Read instructions carefully

Do not attach any additional documents to this Qualifications Assessment or send any forms/documents in advance.

This process is the entire examination for the above classification. Therefore, please be sure to follow the instructions carefully as missing or incomplete information may result in disqualification or a lower score.

1. Additional instructions are provided on the following pages.
2. If successful, your name will be placed on an eligible list for the classification listed above.
3. The examination is intended to provide candidates the opportunity to demonstrate their knowledge and experience in a variety of areas. It is not expected that you will have experience in all areas.

The following areas comprise the complete examination for Associate Budget Analyst. You must ensure you have addressed each of the following areas:

- Affirmation Statement (page 1)
- General Instructions (page 2)
- Prior State Employment Information (page 3)
- Conditions of Employment (pages 4)
- Job Requirements (page 5)
- Desirable Qualifications (page 6)
- Associate Budget Analyst Knowledge and Experience (pages 7 - 8)

YOUR RESPONSES ARE SUBJECT TO VERIFICATION

Please keep in mind that all information provided on this Qualifications Assessment will be subject to verification at any time during the examination process, hiring process, and even after gaining employment. Anyone who misrepresents his/her experience will be subject to adverse consequences, which could include the following action(s):

- Removal from the examination process
- Removal from the certification list
- Loss of State employment
- Loss of rights to compete in any future State examinations

PRIOR STATE EMPLOYMENT INFORMATION

Complete this next section ONLY if you have been previously dismissed from California State Civil Service employment by punitive action or as a result of disciplinary proceedings. IF THIS DOES NOT APPLY TO YOU, please skip this question.

Rule 211 provides that a dismissed State employee may only participate in State Civil Service examinations if he/she has obtained prior consent from the State Personnel Board.

Do you have written permission from the State Personnel Board Executive Officer to take this examination?

<input type="checkbox"/>	YES
<input type="checkbox"/>	NO

**AVAILABLE POSITIONS ARE LOCATED
THROUGHOUT THE STATE OF CALIFORNIA**

After list release, please notify the California Department of Corrections and Rehabilitation (CDCR) promptly of any address changes or availability for employment at the following address:

California Department of Corrections and Rehabilitation
Division of Human Resources
Office of Workforce Planning
P.O. Box 942883
Sacramento, CA 94283-0001
Attn: Certification Unit

CONDITIONS OF EMPLOYMENT FORM FOR CDCR COUNTY LOCATIONS

PLEASE MARK THE APPROPRIATE BOX(ES) OF YOUR CHOICE - YOU WILL NOT BE OFFERED A JOB IN LOCATIONS NOT MARKED.

Note: Positions are not available at all locations. Please refer to the official examination bulletin for information regarding current available positions and their locations.

If you are successful in this examination, your name will be placed on an active employment list and referred to fill vacancies according to the conditions you specify on this form. Therefore, before you mark this form, there are some things you should consider. If you are not planning to relocate or are not willing to travel to a distant job location, do not select locations that are a long way from your residence. You may choose up to 15 different locations. If you choose more than 15, you will be certified for anywhere in the State.

TYPE OF APPOINTMENT YOU WILL ACCEPT

Please mark the appropriate box(es) - you may check "(A) Any" if you are willing to accept any type of employment.

☐ (D) Permanent Full-Time ☐ (R) Permanent Part-Time ☐ (K) Limited-Term Full-Time ☐ (A) Any

If all are marked and you receive an appointment other than permanent full-time, your name will continue to be considered for permanent full-time positions.

☐ (5) ANYWHERE IN THE STATE - If this box is marked, no further selection is necessary.

☐ 7238 UPPER NORTHERN REGION - If this box is marked, no further selection is necessary.

<input type="checkbox"/> 0800 Del Norte	<input type="checkbox"/> 1200 Humboldt	<input type="checkbox"/> 1800 Lassen	<input type="checkbox"/> 2300 Mendocino
<input type="checkbox"/> 2500 Modoc	<input type="checkbox"/> 3200 Plumas	<input type="checkbox"/> 4500 Shasta	<input type="checkbox"/> 4700 Siskiyou
<input type="checkbox"/> 5200 Tehama	<input type="checkbox"/> 5300 Trinity		

☐ 7231 NORTHERN REGION - If this box is marked, no further selection is necessary.

<input type="checkbox"/> 0100 Alameda	<input type="checkbox"/> 3100 Placer
<input type="checkbox"/> 0200 Alpine	<input type="checkbox"/> 3400 Sacramento
<input type="checkbox"/> 0300 Amador	<input type="checkbox"/> 3800 San Francisco
<input type="checkbox"/> 0400 Butte	<input type="checkbox"/> 3900 San Joaquin
<input type="checkbox"/> 0500 Calaveras	<input type="checkbox"/> 4100 San Mateo
<input type="checkbox"/> 0600 Colusa	<input type="checkbox"/> 4600 Sierra
<input type="checkbox"/> 0700 Contra Costa	<input type="checkbox"/> 4800 Solano
<input type="checkbox"/> 1100 Glenn	<input type="checkbox"/> 4900 Sonoma
<input type="checkbox"/> 0900 El Dorado	<input type="checkbox"/> 5100 Sutter
<input type="checkbox"/> 1700 Lake	<input type="checkbox"/> 5200 Tehama
<input type="checkbox"/> 2100 Marin	<input type="checkbox"/> 5500 Tuolumne
<input type="checkbox"/> 2800 Napa	<input type="checkbox"/> 5700 Yolo
<input type="checkbox"/> 2900 Nevada	<input type="checkbox"/> 5800 Yuba

☐ 7232 CENTRAL REGION - If this box is marked, no further selection is necessary.

<input type="checkbox"/> 1000 Fresno	<input type="checkbox"/> 2700 Monterey
<input type="checkbox"/> 1400 Inyo	<input type="checkbox"/> 3500 San Benito
<input type="checkbox"/> 1500 Kern	<input type="checkbox"/> 4000 San Luis Obispo
<input type="checkbox"/> 1600 Kings	<input type="checkbox"/> 4300 Santa Clara
<input type="checkbox"/> 2000 Madera	<input type="checkbox"/> 4400 Santa Cruz
<input type="checkbox"/> 2200 Mariposa	<input type="checkbox"/> 5000 Stanislaus
<input type="checkbox"/> 2400 Merced	<input type="checkbox"/> 5400 Tulare
<input type="checkbox"/> 2600 Mono	

☐ 7233 SOUTHERN REGION - If this box is marked, no further selection is necessary.

<input type="checkbox"/> 1300 Imperial	<input type="checkbox"/> 3600 San Bernardino
<input type="checkbox"/> 1900 Los Angeles	<input type="checkbox"/> 3700 San Diego
<input type="checkbox"/> 3000 Orange	<input type="checkbox"/> 4200 Santa Barbara
<input type="checkbox"/> 3300 Riverside	<input type="checkbox"/> 5600 Ventura

Please notify CDCR promptly of any address changes or availability for employment at the following address: CDCR, Human Resources, Office of Workforce Planning, P.O. Box 942883, Sacramento, CA 94283-0001, Attn: Certification Unit

JOB REQUIREMENTS

The following are job requirements. Please respond to each question by marking the appropriate box. If you are unwilling or unable to comply with any of the following job requirements, it will be grounds for elimination from the examination process.

1. Are you willing to abide by and adhere to safety policies and provisions applicable to specific work assignments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you willing to comply with annual tuberculosis screening requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are you willing to visit a State correctional facility on occasion and abide by the institutional dress code as part of your assigned duties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you willing to comply with departmental training requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Are you willing to report staff misconduct, dangerous situations to supervisors?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are you willing to provide instruction or oversight regarding departmental policies, procedures, standards, and practices to other employees, outside consultant, and/or member of the public?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Are you willing to report unethical and/or illegal behavior on the part of departmental staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Are you willing to train and/or act as a lead?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Are you willing to accept constructive criticism and respond appropriately?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Are you willing to promote positive, collaborative, professional working relations among co-workers both within and outside the work unit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Are you willing to work professionally with individuals from a wide range of cultural backgrounds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Are you willing to participate in team meetings, committees, special projects, etc. as required and/or assigned by your supervisor/manager?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Are you willing to work overtime, on occasional weekends and on-call hours as required?	<input type="checkbox"/> Yes <input type="checkbox"/> No

DESIRABLE QUALIFICATIONS

Please indicate if you have any of the following certifications, training or experience by marking the appropriate box(es).

1. At least two years of experience and/or training using Microsoft Office applications, including Excel and Word.	
2. More than six months of experience using 10-key by touch.	
3. At least four years of experience working in a state budgeting/accounting environment.	

KNOWLEDGE AND EXPERIENCE

Note: To respond appropriately, you must refer to the scale description below and check the appropriate box for Knowledge and Experience (YOU CAN ONLY CHECK **ONE** BOX FOR KNOWLEDGE AND **ONE** BOX FOR EXPERIENCE).

Extensive Knowledge: I have knowledge at a level to effectively perform this task independently.

Moderate Knowledge: I have knowledge to perform this task, but may require general supervision.

Basic Knowledge: I have limited knowledge of how to perform this task and require direct supervision.

No Knowledge: I do not have knowledge of how to perform this task.

Extensive Experience: I have performed tasks in this area often.

Moderate Experience: I have occasionally performed and/or assisted in performing tasks in this area.

Basic Experience: I have limited experience performing tasks in this area.

No Experience: I do not have any experience performing tasks in this area.

	KNOWLEDGE Related to performing this task				EXPERIENCE Related to performing this task			
	Extensive Knowledge	Moderate Knowledge	Basic Knowledge	No Knowledge	Extensive Experience	Moderate Experience	Basic Experience	No Experience
1. Prepare baseline budget to determine Institution/Office/Division's initial allotment and budget changes.								
2. Prepare budget revisions to re-align budget authority.								
3. Review and analyze Policy Budget Concept Statements (BCSs).								
4. Review and analyze Policy Budget Change Proposals (BCPs) and/or Finance Letters (FLs).								
5. Review and analyze Population BCP/May Revision for accuracy and appropriateness of funding.								
6. Process Policy BCPs/FLs for submittal to the Department of Finance (DOF).								
7. Process Population BCP/May Revision for submittal to DOF.								
8. Reconcile appropriation by source of funding.								
9. Prepare and process budget transfer to align funding to meet departmental needs.								
10. Provide budget information and workload status to external stakeholders and/or departmental staff.								
11. Provide instruction and assistance to departmental staff on budget matters.								
12. Make recommendations on budget matters to departmental management.								
13. Analyze proposed legislation to determine funding impact on Institution/Office/Division.								
14. Review purchase estimates and/or contracts to ensure adequate funding.								

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	KNOWLEDGE Related to performing this task				EXPERIENCE Related to performing this task			
	Extensive Knowledge	Moderate Knowledge	Basic Knowledge	No Knowledge	Extensive Experience	Moderate Experience	Basic Experience	No Experience
15. Review personnel transaction documents to verify budget and position authority.								
16. Prepare various reports and/or correspondence for external and internal stakeholders.								
17. Review budget allotment for accuracy.								
18. Prepare various analyses and reports for yearly fiscal reviews.								
19. Prepare various schedules for inclusion in the Governor's Budget.								
20. Create and update Position Recap to reconcile position authority.								
21. Prepare and analyze monthly budget plans.								
22. Prepare Position Authority Reconciliation (PAR) reports.								
23. Perform research and analysis on complex budget issues.								
24. Coordinate special assignments by providing direction and guidance.								
25. Function as a lead analyst to assist staff in training and completing assignments.								
26. Prepare and present analysis to departmental stakeholders.								
27. Assist in resolving complex budget issues.								

**THIS CONCLUDES THE QUALIFICATIONS ASSESSMENT FOR
ASSOCIATE BUDGET ANALYST**

Please refer to page one for mailing instructions